## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

## **RECEIVED**

PLEASE PRINT

|  |                                  | APR 1 / 2                   | 017                    |
|--|----------------------------------|-----------------------------|------------------------|
| I. Name of Lobbyist(s) Christopher Buchanan  |                                  | NEW HAMPSI                  | OIDE -                 |
| II. Name of lobbyist's partnership, firm or corporation  | n, if any:                       | DEPARTMENT O                | FSTATE                 |
| N/A  |                                  |                             |                        |
| (Name of partnership, firm or corporation)   | •                                |                             |                        |
| 31 Home Depot Drive PMB 295 Plym   | outh N                           | ЛΑ                          | 02360                  |
| Business Address: (Street) (Town/C   | City) (S                         | itate)                      | (Zip Code)             |
| (508) 759-4581 ( )   | e-mail                           | chris.buchanan@waln         | nart.com               |
| (Telephone)  | (Fax)                            |                             |                        |
| III. This statement covers: (Choose one – file separate reportable expense transactions which are not attribu  |                                  | OR you may file a           | separate report for    |
| All reportable transactions occurring in the months p  | rior to the reporting date re    | elative to the follow       | ing client:            |
| Wal-Mart Stores, Inc.  |                                  |                             |                        |
| (Full Name of Client as it appears or  | the Lobbyist Registration Fo     | orm)                        | <del></del>            |
| <u>OR</u>  |                                  |                             |                        |
| ☐ All reportable transactions by the lobbyist (including unrelated to any particular client.   | the lobbyist's family), or t     | he lobbying firm lis        | ted below which are    |
| IV. Date of Report April 26, 2017  | July 26, 20                      |                             |                        |
| Reports cover: activity from date of registration to 3/31/1.   | • •                              |                             |                        |
| October 25, 2017 [ ] activity from 7/1/17 to 9/30/17   | January 31<br>activity from 10/1 |                             |                        |
| V. There have been no fees received and no repo If this box is checked, complete just this form and submit Concord, NH 03301.  |                                  |                             | _                      |
| VI. Check if additional reports are attached:  |                                  |                             |                        |
| If you have received fees or made expenditures, you  | must file Addendum A-            | Fees and Expenses           |                        |
| If you have paid an honorarium or reimbursed expene Expense Reimbursement  | ses, you must file Addend        | dum B- Report of H          | lonorariums or         |
| If you, your firm, or your family has made political of  | contributions, you must fil      | e Addendum C– Po            | olitical Contributions |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and complete to the best of my knowledge and belief.  (Signature of lobbyist)  Christopher Buchanan   | and hereby swear or affin        | m that the foregoing (Date) | g information is true  |
| (Print Name of lobbyist)   |                                  |                             |                        |
| and the contract of the contra |                                  |                             |                        |